

STI Global Update

Newsletter of the International Union against Sexually Transmitted Infections

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President's Column

Dear members of IUSTI and colleagues interested in STIs!

There are several questions I would like to raise:

Who is the oldest president of IUSTI (former IUVDT)?

At the end of November 2008, Prof. Anton Luger, former distinguished President of IUVDT and best known in venereology for his research work in syphilis, received the Lifetime Achievement IUSTI Gold Medal during a festive symposium, held in the magnificent Old Aula of the Austrian Academy of Sciences at the Annual Meeting of the Austrian Society for Dermatology and Venereology to commemorate his 90th Birthday. Together with Prof. Thomas Luger, Anton Luger's son and President of the German Dermatological Society, I had the privilege of chairing the symposium. Dr. Michael Waugh gave a Keynote Lecture on "Never Forget Syphilis" and expressed his congratulations on behalf of all STD specialists throughout the World. King Holmes, who was unable to attend the birthday celebration, characterized Anton Luger as a "Marathon Dermatovenereologist – in fact, the leader of his generation from Europe". Anton Luger expressed his thanks in a very stimulating talk in front of several hundred dermatologists. After Michael Waugh, Anton Luger is the second person receiving the IUSTI Gold Medal. Read more about it on the IUSTI website.



Angelika Stary and Anton Luger

Have you already blocked the time for the IUSTI World Conference in your diary?

IUSTI Africa will organize the 11th USTI World Conference in Cape Town in November, 9-12, 2009, under the banner "Global STIs: Old Problems and New Solutions".

The Regional Director David Lewis will chair the conference together with Kit Fairley, the scientific co-chair, and Janet Wilson, responsible for international organisation. The conference will offer a pre-conference STI course, organized by IUSTI North America, and will provide the opportunity to present local data and get information on the most recent developments in the STI world and to learn about problems in all regions of the world. Don't miss this unique opportunity to attend this important conference in a very special place!

Have you heard about the most recent development in the IUSTI Europe Branch?

Since the end of January, IUSTI Europe is officially established as a non-profit association registered in Estonia. This is a big achievement for the regional branch. I want to express my special congratulations to Keith Radcliffe, the Regional Director, and Airi Poder, the Regional Chair, who were so successful in organizing this in a very short time. The feedback from the European National Representatives was very enthusiastic.

This enables IUSTI Europe to have its own legal status, but at the same time IUSTI Europe will continue to play a role as one of the 5 regional IUSTI Branches of IUSTI worldwide.



IUSTI World Executive Committee - 2008

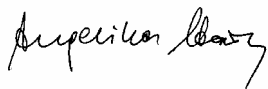
Have you ever visited our website?

The IUSTI website www.iusti.org, which is regularly updated by Prof. Michael Ward, offers information on IUSTI activities, STI management guidelines, regional activities, important STI meetings, and the advantages of membership. Recently, online-membership application has also become available. If

you are not yet a IUSTI member, send us your application via internet. As a full member you will have several advantages and access to a reduced registration fee at IUSTI meetings.

Do you have new ideas, questions, remarks or proposals for improvements?

If you are interested in a more active cooperation with IUSTI you are welcome and invited to contact us. We appreciate your comments!



Angelika Stary
IUSTI world president

Regional Reports

Latin America

Latin-American and Caribbean Day for the Elimination of Congenital Syphilis

ALAC in its last meeting, agreed to nominate and promote in the region the third Saturday of October each year as the *Latin-American and Caribbean Day for the Elimination of Congenital Syphilis*. This idea was initiated 5 years ago in Brazil by their National Society of STIs. In 2008, it was celebrated on October 18th, with the participation of the Government, academia and community in several countries including Argentina, Brazil, Honduras and Uruguay. Community outreach activities have included distribution of educational materials and free testing for syphilis with a rapid test in Honduras.



Rapid Syphilis Testing Campaign in Honduras

New STI Associations in the Region

A new Uruguayan society against STIs has been created. Dr. Libia Cuevas, an ALAC member, reported that SUCITS (Sociedad Uruguaya para el control de las ITS) will continue the work started by UPACITS, which started activities related to STI prevention and control 31 years ago.

In Argentina, the society for obstetrics and gynecological infections (ASAIGO) has been renamed ASAIGO-ITS, to stress the importance of sexually transmitted infections and strengthen their activities towards STI control. Dr. Miguel Tili, also an ALAC member, has been appointed president of the society.

Implementation projects aim to decrease congenital syphilis in Latin America

Dr. Adele Benzaken, director of the Foundation Alfredo de la Mata-Brazil and ALAC president, hosted (for the first time in the Americas) the meeting of the Joint Coordinating Board (WHO TDRs top coordinating body) in the Amazonas. This occurred under the auspices of a WHO-Gates funded project to implement Rapid Point of Care Tests: “Syphilis Rapid Test for Native communities in the Brazilian Amazon”. During the meeting she described how the research aims to reduce the incidence of congenital syphilis in Brazilian babies. Between 1998 and 2007, 41 000 Brazilian babies were born with congenital syphilis.



Educational materials promoted by Brazil within the campaign for the control of syphilis, with participation of soccer players

Courses, Symposiums and other academic activities related to STIs in the region

Argentina, August 2008: Symposium: “Perinatal Infections and STI Control in the border of Argentina-Chile”

Uruguay, October 2008: “V Course on Sexually Transmitted Infections”

Brazil, September 2008: “VII Congress on Sexually Transmitted Infections and III Brazilian Congress on AIDS”

Books recently published

Dr. Patricia J. Garcia published December 2008 “Sex and risk: adolescents and their mothers confronting AIDS and STIs” a book based on a study of adolescents sexual behaviors, communication with parents, condom use and STIs in Peru, funded by The Global Fund to fight AIDS, Tuberculosis and Malaria.

Dr. Adele Benzaken published the book “Prevalences and relative frequencies of STI in six cities in Brazil”. The book has been presented to the Brazilian National HIV-STI Program.

Patty Garcia

Europe

I have some very exciting news to report, which is that the European Branch of IUSTI (IUSTI Europe) now has a legal status as a non-profit association registered in Estonia. This has been a long time in the preparation, but came to fruition when I made a recent visit to Tallinn and met there with Airi Poder (IUSTI Europe Chair) and Angelika Stary (IUSTI World President). We had to visit a public notary's office in order to sign the necessary papers, but following on from this, IUSTI Europe achieved this status on 5 February 2009. Our registration code is 80279996, and our registered legal address is Sõbra 54, Tartu 50160, Estonia. The fact that the European Branch now has a legal status in a European Union member state will be of enormous value to us in the long term.



Angelika Stary, Keith Radcliffe and Airi Poder signing the legal papers to establish IUSTI Europe as a legal entity

The International Society for STD Research (ISSTD) in conjunction with the British Association for Sexual Health and HIV (BASHH) will be jointly holding a conference in London between 28 June and 1 July 2009. As previously agreed, IUSTI Europe will be taking the opportunity of this excellent meeting to conduct essential business. On Sunday 8 June there will be a meeting of the European STI Guidelines Editorial Board in the morning, followed by a meeting of the IUSTI Europe Board in the afternoon. Full information about the meeting is obtainable from the website: www.isstdlondon2009.com.

In 2010 IUSTI Europe will be holding a meeting in Tbilisi, the capital of Georgia. The prospect of participating in the first international STI conference to be held in a former Soviet Union country is very exciting. Our chair, Airi Poder, has made a field visit to meet with the local organisers and has reported back extremely positively. A further field visit is going to be made in the next couple of months by Airi, together with Simon Barton, Treasurer of IUSTI Europe. The congress will take place between 23-25 September 2010.

The 2011 conference will take place in the capital of Latvia, Riga, 8-10 September 2011, and will be hosted by Andris Rubins. The chair of the international scientific committee for that meeting is Willem van der Meijden.

Bids for future IUSTI Europe conferences, that is, for 2012 and beyond, will be considered at the next IUSTI Board meeting in London in June.

Work continues on updating the European STI guidelines. A guideline on HIV testing has been completed and is accessible on the IUSTI website. It has also been published as, 2008 European Guideline on HIV testing. Poljak M, Smit E, Ross J. *Int J STD & AIDS* 2009; **20**: 77-83.

Guidelines on syphilis and gonorrhoea have also been completed and are pending publication, both electronic and in paper form. A revised draft guideline on urethritis is on the website for consultation; further information is available from Michel Janier (email: michel.janier@sls.aphp.fr).

Revision has commenced on the following guidelines: genital warts, scabies, pediculosis pubis, hepatitis, vaginal discharge, chlamydia, tropical genital-ulcerative diseases.

Information about the guidelines, including access to the completed guidelines themselves, is available at the IUSTI website. From the homepage navigate via "IUSTI Regions" then "Europe" then "Guidelines".

As Editor-in-Chief I should be very happy to hear from anybody who has any suggestions for new guidelines, or who would like to become involved in writing guidelines.

Keith Radcliffe

North America

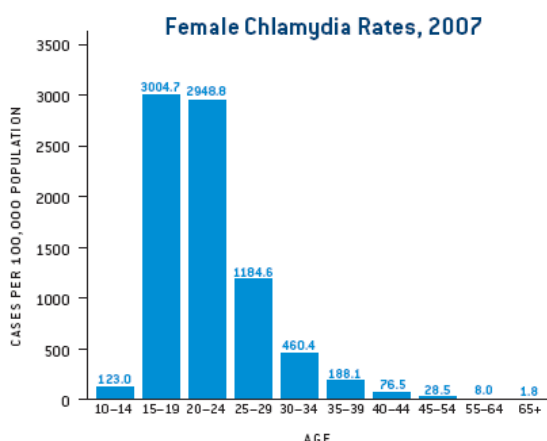
STI Surveillance Reports 2007 are newly released by the Centers for Disease Control and Prevention

They can be accessed at <http://www.cdc.gov/std/stats07/>. Sexually transmitted diseases (STDs) remain a major public health challenge in the United States. CDC estimates that approximately 19 million new infections occur each year— almost half of them among young people 15 to 24 years of age.

In addition to the burden on youth, women are also severely affected. Biological factors place women at greater risk than men for the severe health consequences of STDs. The two most commonly reported infectious diseases in America — chlamydia and gonorrhoea — pose a particular risk to the health of women, as both can result in infertility if left untreated. Together, these diseases were reported in almost 1.5 million Americans in 2007, but the majority of cases continue to go undiagnosed. Both of these diseases, along with syphilis and herpes, have also been associated with increased HIV transmission, which is of particular concern among men who have sex with men (MSM) of all races and African-American men and women, where the HIV burden is now greatest. Reducing the preventable and persistent toll of STDs will require expanded access to prevention, treatment, and screening services for the diverse populations now at risk. Many cases of notifiable STDs go undiagnosed, and some common viral infections, such as human papillomavirus and genital herpes, are not reported at all.

Chlamydia remains the most commonly reported disease in the United States. In 2007, 1,108,374 chlamydia diagnoses were reported, up from 1,030,911 in 2006. The 2007 total represents the largest number of cases ever reported to CDC for any condition. Even so, most chlamydia cases still go undiagnosed. CDC estimates that there are approximately 2.8 million new cases of chlamydia in the United States each year, indicating that more than half of new cases remain undiagnosed and unreported. The national rate of reported chlamydia in 2007 was 370.2 cases per 100,000 population, an increase of 7.5 percent from 2006 (344.3).

Women, especially young and minority women, are hit hardest by chlamydia. Studies have found that women are most severely impacted by the long-term consequences of untreated chlamydia. The reported chlamydia case rate for females in 2007 was almost three times higher than for males (543.6 vs. 190.0 per 100,000 population). Much of this difference reflects the fact that females are far more likely to be screened than males. Young females 15 to 19 years of age had the highest chlamydia rate. Chlamydia is common among all races and ethnic groups; however, African-American, American Indian/ Alaska Native, and Hispanic women are disproportionately affected. In 2007, black females 15 to 19 years of age had the highest chlamydia rate of any group (9,646.7). The rate of reported chlamydia per 100,000 black females overall (1,906.0) was almost eight times that of white females (249.3) and almost three times that of Hispanic females (753.3). The rate among American Indian/Alaska Native females was the second highest (1,158.2), while the rate among Asian/Pacific Islander females was the lowest (208.8).



CDC reported that three goals will receive high priority focus in 2009:

- prevent STI-related infertility
- reduce STI-related health disparities across and within communities and populations (See <http://www.cdc.gov/std/health-disparities/default.htm>)
- strengthen STI-related prevention capacity and infrastructure

CDC has been supporting “expedited partner therapy” (EPT) whereby infected individuals can obtain antibiotics or prescriptions for antibiotics for

their partners as a useful option to help facilitate partner notification and treatment for chlamydia and gonorrhea. In August 2008, the American Bar Association passed a regulation to support removal of legal barriers to EPT. Six more states have taken action to permit EPT. See <http://www.cdc.gov/std/ept/>.

National Black HIV/AIDS Awareness Day Was February 7, 2009

Statement by Dr. Kevin Fenton Director, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention Centers for Disease Control and Prevention:

“National Black HIV/AIDS Awareness Day is a day to focus attention on the staggering toll HIV continues to take on the black community. It is also a day of hope – a day on which we recognize the progress we continue to make towards ending this epidemic in our communities. Today, African-Americans continue to face the most severe rates of HIV infection in the nation. The latest estimates indicate that while blacks make up just 12 percent of the U.S. population, they account for nearly half of new HIV infections and almost half of the more than one million Americans estimated to be living with HIV. The harsh reality is that 1 in 16 black men will be diagnosed with HIV at some point in their lifetime, as will 1 in 30 black women. Black gay and bisexual men and black women are particularly hard hit by HIV. Sixty-three percent of new infections among black men occur among men who have sex with men (MSM). Further, there are troubling signs of a worsening epidemic among young black MSM, as HIV diagnoses in this population have increased dramatically in recent years. Black women are also disproportionately affected by HIV, with infection rates 15 times as high as those of white women. To turn the tide, we all must continue to confront the realities of this disease in African-American communities. While race itself does not increase risk, high prevalence of HIV and other sexually transmitted diseases in black communities means African-Americans face a greater risk of HIV infection with each sexual encounter than other groups. Stark realities of some African-Americans’ lives – including poverty and limited access to health care – increase the likelihood of HIV infection. Stigma and homophobia also contribute to keeping HIV alive in black communities.” See <http://www.cdc.gov/nchhstp/newsroom/NBHAADPresrelease-013009.htm>

News from the American Social Health Association (ASHA)

ASHA's three websites (www.ashastd.org, www.iwannaknow.org, and www.quierosaber.org) play a vital part in ASHA's outreach efforts. Nearly two million people visit the ASHA sites each year seeking information on sexually transmitted infection, answers to their questions on sexual health, and support from others. In recent months, ASHA has been working on some significant web changes, with two major launches in 2009. ASHA rolled out a new "Ask the Experts" feature on the main ASHA site, www.ashastd.org in January of this year. Website users are invited to e-mail questions for our panel of

experts including physicians, nurse practitioners, and other health professionals with experience to answer. This new feature has already garnered a tremendous response from site users and is anticipated to grow over time as a trusted resource. ASHA's website for teens, www.iwannaknow.org, was also reviewed, revised and revamped over the past year and launched with a fresh new look in February 2009. Covering topics from puberty to peer pressure to STI prevention, the new site offers teens a reliable source of scientifically accurate information on STIs and sexual health issues.

South African IUSTI meeting, Cape Town, November 9-12, 2008

North America IUSTI is planning a didactic STI/HIV course for delegates from Africa at the South African IUSTI meeting, Cape Town, November 9-12, 2008. The course will be given the day before the meeting (Nov 8) and will cover topics about HIV, HSV, syphilis, chlamydia and gonorrhea, behavioral interventions, etc. Attendees will be selected from applicants from African countries, who have submitted abstracts for the meeting. More information will be coming soon.

Charlotte Gaydos

Asia-Pacific

Update on the STI and HIV situation in China - Syphilis, gonorrhea and genital chlamydia

In China, the sexually transmitted infections (STI) of syphilis and gonorrhea are reported through a national surveillance system, while genital chlamydia is reported in 105 sentinel cities or counties.

Since the last report, there has been a continued increase in reported cases of syphilis and a continued decrease in reported cases of gonorrhea. There were 278,215 cases of active syphilis reported in 2008, for a rate of 21.1 per 100,000 population. This represents a 23.3% increase compared with the rate in 2007. The number of reported cases of gonorrhea in 2008 was 134,303, for a rate of 10.2 per 100,000 population. This represents a decrease of 9.8% compared with the rate in 2007. In 2008, the chlamydia infection rate reported at 105 sentinel cities and counties was 32.3 per 100,000 population. Data from prevalence surveys among high risk groups have shown high prevalence of syphilis in female sex workers (FSW) and men who have sex with men (MSM). A nationwide survey reveals a syphilis prevalence of more than 11% among MSM. This rate is even higher in some cities in southern China, for example in Shenzhen, where syphilis prevalence among MSM has been recorded at 20%. Several studies among FSW in cities of Guangdong and Hainan provinces have indicated that the syphilis prevalence (>30%) among those FSWs based in privately rented houses is much higher than those based in salons (6-7%) or entertainment establishments.

HIV and AIDS

In 2007, the Ministry of Health, UNAIDS and WHO completed a joint updated assessment of the

HIV/AIDS epidemic in China. The results showed that by the end of 2007, approximately 700,000 individuals were HIV positive (range 550,000-850,000), giving an overall HIV infection rate of 0.05% (range 0.04-0.07%) among China's population. The estimated number of AIDS cases was 85,000 (range 80,000-90,000).

The majority of China's HIV cases remain undetected. According to the National Surveillance Program under the Ministry of Health, a total of 45,572 newly detected HIV infections were reported in 2008, bringing the cumulative number of actual reported HIV cases to 276,335 at the end of 2008.

Sexual transmission has become the predominant route for new HIV infections. Among newly reported cases in 2008, 27.9% were infected through injection drug use, 40.3% through heterosexual contact, and 5.9% through homosexual contact.

Currently, China's HIV epidemic remains one of low prevalence overall, but with pockets of high infection among specific sub-populations and geographic locations. The MSM population is a group of growing importance for the sexual transmission of HIV in China. According to a recent nationwide survey among 61 cities in China, the overall prevalence of HIV infection among MSM was 4.9%, up from 0.4% three years ago. Future outreach, education and surveillance should incorporate MSM as part of comprehensive HIV prevention and control efforts, as well as continuing existing work among other high-risk subgroups and localities.

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Xiang-Sheng Chen and Kathryn E. Muessig

Africa

The International Conference for AIDS and STDs in Africa (ICASA) took place at the beginning of December 2008 in Dakar, Senegal. This conference was attended by approximately 10,000 people and was a well-executed event, given the large volume of delegates. There was much political support for the conference, with the President of Senegal speaking at the opening ceremony. Several of the First Ladies of Africa attended the conference during the ensuing days. The opening ceremony was a typically African affair, with drums, singing and dancing outside the conference venue in the grounds of Le Meridien Hotel. Scientific tracks covered key areas of importance to the HIV/AIDS epidemic in Africa, including presentations on the roll out of male circumcision in a number of countries, the importance of partner concurrency and sexual behaviour, and the

synergistic interactions between STDs and HIV transmission. Importantly for Africa, there were several presentations from Nigeria, Malawi and South Africa of 'first-time' reported data on HIV prevalence among black African communities of men who have sex with men (MSM); this high risk group remains marginalised and discriminated against in many African countries. Several presentations alluded to human rights abuses against MSM including blackmail, discrimination in terms of housing and health service provision, physical violence and sexual assault. Homosexuality is still illegal in many African countries, with prison sentences of up to 5 years in several countries; some countries still have a death penalty for those engaging in MSM sexual relationships.



IUSTI-AFRICA stand at the 15th ICASA in Dakar Senegal

In January, the annual Regional Dermatology Training Centre's Conference took place in Moshi, Tanzania. The Regional Director attended and delivered a presentation on STIs in Africa, with particular emphasis on the importance of public health surveillance and the need for evidence-based updating of STI treatment guidelines. Dr. Cornelius Sanders, a member of IUSTI-Europe who has previous work experience in Zimbabwe, also gave a lecture on the history of, and the challenges of dealing with, the HIV/AIDS epidemic in Africa. The Regional Director presented the Michael Waugh Prize for the best STI-related dissertation to one of the Kenyan students, whose chosen subject focused on HIV voluntary counselling and testing.



Presentation of the Michael Waugh Prize by Dr David Lewis to Dr. Godfrey Muriu (Kenya) for the best STI-related health sciences dissertation

Finally, preparations are going well for the forthcoming IUSTI World Conference to be held in Cape Town, South Africa from 9-12 November this

year. A scholarship fund to support African delegates to attend the conference has been set up and so far has received support from the US National Institutes of Health and the World Health Organisation. The award of scholarships will for the most part be abstract driven, so potential recipients are encouraged to show-case their research work. It is planned to place further key information on the conference website in March (www.iusti.co.za). The 2nd announcement and call for abstracts will go out in March.

David Lewis

Conference Update

IUSTI Events:

11th IUSTI World Congress

Dates: November 9-12, 2009

Location: Cape Town, South Africa

Website:

<http://www.iusti.org/regions/africa/default.htm#saconf>

25th Conference on Sexually transmitted infections and HIV/AIDS- IUSTI Europe 2010

Dates: To be announced

Location: Tbilisi, Georgia

Website: www.iusti.org

26th IUSTI Europe Congress

Dates: September 8-10, 2011

Location: Riga, Latvia

Contact: Prof. Dr. Andris Rubins, Email:

arubins@apollo.lv

12th IUSTI World Congress

Dates: November 2-5, 2011

Location: New Delhi, India

Website: www.iusti2011.org

13th IUSTI World Congress

Dates: To be announced

Location: Melbourne, Australia

Contact: Prof. Christopher Fairley, Email:

cfairley@bigpond.com

Other STI or Related Meetings/Congresses/Courses:

25th International Papillomavirus Conference

Dates: May 8-14, 2009

Location: Malmö, Sweden

Website: <http://www.hpv2009.org/>

American Conference for the Treatment of HIV

Dates: May 15 - 17, 2009

Location: Denver, Colorado, USA

Website: <http://www.achiv.org/>

19th European Congress of Clinical Microbiology and Infectious Diseases

Dates: May 16-19, 2009

Location: Helsinki, Finland
10th International Congress of Dermatology
Website: <http://www.congrex.ch/eccmid2009/>

International Workshop on Neisseria Vaccines
Dates: May 17-22, 2009
Location: Varadero, Cuba
Website: <http://www.sci.sld.cu/neisseria/neisseria.htm>

International Congress of Dermatology
Dates: May 20- 24, 2009
Location: Prague, Czech Republic
Website: <http://www.icd2009.com/>

Induced abortion: rights, technology and delivery of care
Date: May 22, 2009
Location: London, UK
Website:
http://www.bashh.org/meetings/301_induced-abortion-rights-technology-and-delivery-of-care

Current Issues in Sexual Health
Dates: May 28-29, 2009
Location: London, UK
Website: http://www.mahealthcareevents.co.uk/cgi-bin/go.pl/conferences/detail.html?conference_uid=88

5th International HIV and Hepatitis Co-infection Workshop
Dates: Jun 04-06, 2009
Location: Lisbon, Portugal
Website: www.virology-education.com

19th World Congress for Sexual Health
Dates: June 21-25, 2009
Location: Göteborg, Sweden
Website: www.sexo-goteborg-2009.com/

International Society for Sexually Transmitted Diseases Research
Dates: June 28 - July 1, 2009
Location: London, United Kingdom
Website: <http://www.isstdrlondon2009.com/>

International AIDS Society 2009
Dates: July 19-22, 2009

Location: Cape Town, South Africa
Website: www.ias2009.org

BASHH HIV Focus Meeting
Date: September 04, 2009
Location: London, UK
Website: http://www.bashh.org/meetings/289_bashh-hiv-focus-meeting

XX World Congress of International Society for the Study of Vulvo-vaginal Diseases
Dates: September 13-17, 2009
Location: Edinburgh, Scotland, UK
Website: <http://www.issvd.org/meetings.asp>

18th European Academy of Dermatology and Venereology Congress
Dates: October 7-11, 2009
Location: Berlin, Germany
Website: www.eadv.org

BASHH STI and HIV course
Dates: October 19-23, 2009
Location: UK
Website: http://www.bashh.org/meetings/213_bashh-sti-and-hiv-course

12th European AIDS Conference/EACS
Dates: November 11-14, 2009
Location: Cologne, Germany
Website: <http://www.eacs-conference2009.com/>

Somesh Gupta

STI Global Update is published by the International Union against Sexually Transmitted Infections. Its aims are to provide an international perspective on the management and control of sexually acquired infections. Regular contributions from the regional directors of IUSTI and feedback from conferences is supplemented by short reviews of relevant topics and input from the Center for Disease Control (US), Health Protection Agency (UK) and the World Health Organisation.

Prof. Jonathan Ross, Editor
jonathan.ross@hobtpct.nhs.uk

Further information on the activities of IUSTI available at
www.iusti.org